Proof of Claim: Claimant: Ny ma Gonzalez Montalvo

INFORMATION REQUESTED TO PROCESS YOUR CLAIM

Instructions

Please answer all four (4) questions and any applicable sub-questions. Please include as much detail as possible in your responses. Your answers should provide more information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate now on what specific laws you are purporting to rely on, the year the law at issue was passed, and how and why you believe this particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide:

- Copy of a pleading, such as a Complaint or an Answer;
- Any unpaid judgment or settlement agreement;
- Written notice of intent to file a claim with proof of mailing;
- Any and all documentation you believe supports your claim.

Please send the completed form and any supporting documents via **email** to PRClaimsInfo@primeclerk.com, or by **mail or hand delivery** to the following addresseses:

First Class Mail	Hand Delivery				
Commonwealth of Puerto Rico Supplemental	Commonwealth of Puerto Rico Supplemental				
Information Processing Center	Information Processing Center				
c/o Prime Clerk, LLC	c/o Prime Clerk LLC				
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412				
New York, NY 10163-4708	Brooklyn, NY 11232				

Questionnaire

- 1. What is the basis of your claim?
 - A pending or closed legal action with or against the Puerto Rican government
 - □ Current or former employment with the Government of Puerto Rico
 - □ Other (Provide as much detail as possible below. Attach additional pages if needed.)

ley 89

2. What is the amount of your claim (how much money do you claim to be owed):

Total 28,800.

- 3. <u>Employment.</u> Does your claim relate to current or former employment with the Government of Puerto Rico?
 - No. Please continue to Question 4.
 - Yes. Answer Questions 3(a)-(d).
- 3(a). Identify the specific agency or department where you were or are employed:

Doto Educación

Algheira Bourgely Montalvo

Case:17-03283-LTS	Desc: Main
Proof of Claim: Claimant:	
3(b). Identify the dates of your employment related to your claim: Ley 89	
3(c). Last four digits of your social security number: 4436	
3(d). What is the nature of your employment claims (select all applicable): Pension	
Unpaid Wages	
□ Sick Days	
 Union Grievance 	
 Vacation 	
Other (Provide as much detail as possible. Attach additional pages if necessary).	
	-
Elementary of the second and the sec	oe tagali
4. <u>Legal Action</u> . Does your claim relate to a pending or closed legal action?	
□ No.	
Yes. Answer Questions 4(a)-(f).	
4(a). Identify the department or agency that is a party to the action.	
Deto Edución	- Theory O. C
4(b). Identify the name and address of the court or agency where the action is pending: Tribunal Distrito de lost 4 parael Distrit	odePR.
4(c). Case number: 170 3283	
4(d). Title, Caption, or Name of Case: Ley Promesa (casoTitul	0/11
4(e). Status of the case (pending, on appeal, or concluded): Pendi enlo Res	ohecion
4(f). Do you have an unpaid judgment? Yes No (Circle one)	
If yes, what is the date and amount of the judgment?	<u> </u>

Proof of Claim: Claimant:

INFORMATION REQUESTED TO PROCESS YOUR CLAIM

Instructions

Please answer all four (4) questions and any applicable sub-questions. Please include as much detail as possible in your responses. Your answers should provide more information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate now on what specific laws you are purporting to rely on, the year the law at issue was passed, and how and why you believe this particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide:

- Copy of a pleading, such as a Complaint or an Answer;
- Any unpaid judgment or settlement agreement;
- Written notice of intent to file a claim with proof of mailing;
- Any and all documentation you believe supports your claim.

Please send the completed form and any supporting documents via email to PRClaimsInfo@primeclerk.com, or by mail or hand delivery to the following addresseses:

First Class Mail	Hand Delivery				
Commonwealth of Puerto Rico Supplemental	Commonwealth of Puerto Rico Supplemental				
Information Processing Center	Information Processing Center				
c/o Prime Clerk, LLC	c/o Prime Clerk LLC				
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412				
New York, NY 10163-4708	Brooklyn, NY 11232				

Questionnaire

1.	What	is	the	basis	of	your	claim?	•
----	------	----	-----	-------	----	------	--------	---

- A pending or closed legal action with or against the Puerto Rican government
- □ Current or former employment with the Government of Puerto Rico
- Other (Provide as much detail as possible below. Attach additional pages if needed.)

14	2.	2. What is the amount of your claim (how much money do you claim to be owed):	
		Lay que Ja lotal g 3	600
	3.	B. Employment. Does your claim relate to current or former employment with	
		the Government of Puerto Rico?	
		□ No. Please continue to Question 4.	
		Yes. Answer Questions 3(a)-(d).	

3(a). Identify the specific agency or department where you were or are employed:

Alyleia Hourglez Wontalvo

Case:17-03283-LTS
Proof of Claim: Claimant:
3(b). Identify the dates of your employment related to your claim: Ley 96 2004 hasta 2007
3(c). Last four digits of your social security number: 4436
3(d). What is the nature of your employment claims (select all applicable):
Pension
Unpaid Wages
□ Sick Days
□ Union Grievance
□ Vacation
Other (Provide as much detail as possible. Attach additional pages if necessary).
 4. <u>Legal Action</u>. Does your claim relate to a pending or closed legal action? No. Yes. Answer Questions 4(a)-(f).
4(a). Identify the department or agency that is a party to the action. DPTO Educion
4(b). Identify the name and address of the court or agency where the action is pending:
nibural Distrito de los Ell para el Distrito de l'E
4(c). Case number: 1703283
4(d). Title, Caption, or Name of Case: hey Promeso
4(e). Status of the case (pending, on appeal, or concluded): Pendiente Resolución
4(f). Do you have an unpaid judgment? Yes No (Circle one)
If yes, what is the date and amount of the judgment?
order to a real community with which they will the set of the set

Proof of Claim: Claimant:

INFORMATION REQUESTED TO PROCESS YOUR CLAIM

Instructions

Please answer all four (4) questions and any applicable sub-questions. Please include as much detail as possible in your responses. Your answers should provide more information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate now on what specific laws you are purporting to rely on, the year the law at issue was passed, and how and why you believe this particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide:

- Copy of a pleading, such as a Complaint or an Answer;
- Any unpaid judgment or settlement agreement;
- Written notice of intent to file a claim with proof of mailing;
- Any and all documentation you believe supports your claim.

Please send the completed form and any supporting documents via **email** to <u>PRClaimsInfo@primeclerk.com</u> or by **mail or hand delivery** to the following addresseses:

First Class Mail	Hand Delivery
Commonwealth of Puerto Rico Supplemental Information Processing Center c/o Prime Clerk, LLC	Commonwealth of Puerto Rico Supplemental Information Processing Center c/o Prime Clerk LLC
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412
New York, NY 10163-4708	Brooklyn, NY 11232

Questionnaire

1. What is the basis of your claim?

7				04010	01 , 04	I CIG								200
	1	A	pendi	ng or	closed	legal	action	with	or agai	nst the	Puerto	Rican	govern	ment

- □ Current or former employment with the Government of Puerto Rico
- Other (Provide as much detail as possible below. Attach additional pages if needed.)

1		What is the amount of your claim (how much money do you claim	and the second s
		Ley 180 Cost of living	Total 89.85
	3	Employment. Does your claim relate to current or former empl	lovment with
	5.		oyment with
		the Government of Puerto Rico?	
		No. Please continue to Question 4.	
		Yes. Answer Questions 3(a)-(d).	

3(a). Identify the specific agency or department where you were or are employed:

Alebers Hargelez Montalvo

Page 6 of 8 Proof of Claim: Claimant: 3(b). Identify the dates of your employment related to your claim: Ley 180 2006 hasta 200 3(c). Last four digits of your social security number: 3(d). What is the nature of your employment claims (select all applicable): Pension Unpaid Wages Sick Days Union Grievance Vacation Other (Provide as much detail as possible. Attach additional pages if necessary). 4. Legal Action. Does your claim relate to a pending or closed legal action? No. Yes. Answer Questions 4(a)-(f). 4(a). Identify the department or agency that is a party to the action. Doto Edución 4(b). Identify the name and address of the court or agency where the action is pending: Tribunal Distrito de lostu para el Distrito de l 4(d). Title, Caption, or Name of Case: 4(e). Status of the case (pending, on appeal, or concluded): 4(f). Do you have an unpaid judgment? Yes / No (Circle one) If yes, what is the date and amount of the judgment?

Case:17-03283-LTS Doc#:12153 Filed:03/05/20 Entered:03/06/20 14:33:47

Document

Desc: Main

Proof of	C_{l}	lai	im:
Claiman	<i>t</i> •	40	

INFORMATION REQUESTED TO PROCESS YOUR CLAIM

Instructions

Please answer all four (4) questions and any applicable sub-questions. Please include as much detail as possible in your responses. Your answers should provide more information than the initial proof of claim. For example, if you previously wrote as the basis for your claim "Ley 96," please elaborate now on what specific laws you are purporting to rely on, the year the law at issue was passed, and how and why you believe this particular law provides a basis for your claim. Additionally, if available and applicable to your claim, please provide:

- Copy of a pleading, such as a Complaint or an Answer;
- Any unpaid judgment or settlement agreement;
- Written notice of intent to file a claim with proof of mailing;
- Any and all documentation you believe supports your claim.

Please send the completed form and any supporting documents via email PRClaimsInfo@primeclerk.com, or by mail or hand delivery to the following addresseses:

First Class Mail	Hand Delivery				
Commonwealth of Puerto Rico Supplemental	Commonwealth of Puerto Rico Supplemental				
Information Processing Center	Information Processing Center				
c/o Prime Clerk, LLC	c/o Prime Clerk LLC				
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412				
Grand Central Station, PO Box 4708	850 Third Avenue, Suite 412				
New York, NY 10163-4708	Brooklyn, NY 11232				

Questionnaire

1. What is the basis of your claim	m?
------------------------------------	----

A pending or closed legal action with or against the Puerto Rican government

- Current or former employment with the Government of Puerto Rico
- Other (Provide as much detail as possible below. Attach additional pages if needed.)

P4164 2.	What is the amount of your claim (how mu	ich money do you claim to be owed):	
Ley	164		3,600.
V /1	Employment. Does your claim relate to current or former employment with		

- the Government of Puerto Rico?
 - No. Please continue to Question 4.

Yes. Answer Questions 3(a)-(d).

3(a). Identify the specific agency or department where you were or are employed:

Batch 4

Aylura Bargilez Montdoo

Case:17-03283-LTS	Desc: Main			
Proof of Claim: Claimant:				
Leg				
3(b). Identify the dates of your employment related to your claim: 164				
3(c). Last four digits of your social security number: 4436				
3(d). What is the nature of your employment claims (select all applicable):				
 Pension 				
Unpaid Wages				
□ Sick Days				
□ Union Grievance				
□ Vacation				
Other (Provide as much detail as possible. Attach additional pages if necessary).				
4. Legal Action. Does your claim relate to a pending or closed legal action?				
Yes. Answer Questions 4(a)-(f).				
4(a). Identify the department or agency that is a party to the action. Deto Educación				
4(b). Identify the name and address of the court or agency where the action is pending: Tribunal Distrito de los EU para el Distrit	- de PR			
4(c). Case number: 103283				
4(d). Title, Caption, or Name of Case: Ley thomesa (1 tulo 11)				
4(e). Status of the case (pending, on appeal, or concluded) ten devit Resolucion				
4(f). Do you have an unpaid judgment? Yes No (Circle one)				
If yes, what is the date and amount of the judgment?	100			
point to the to	Hal Jus			
and the many converge to another the colorests of the same water building	and I			

Batch 4